U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U -	2. Fiscal Year Covered From:			
11726	7/7/204 Through: 12/31/204			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Randy D Suith	Name Brothstilli & Locamotive Signess			
P.O. Box, Bidg., Room No., if any	P.O. Box, Building and Rcom Number, if any			
Street 2500 Barlana Vije	Street 801 Cherry St.			
City Missoula	City Ft, Works			
State Montana ZIP Code + 4 54803	State 75XAS ZIP Code + 4 76/02			
5. Position in labor organization.				
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.				
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name Trade Name, If any:				
P.O. Box, Bldg., Room No., if any				
Street City ZIP Code + 4	7.b. Amount.			
College Communication in the College C				
Signature				
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)				
Signed Rivery Smith	on 08/15/05 406-251-5775			
,	Date Telephone Number			

Name of Ferson Fully	File Nutriber 0-				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is Interested.					
8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIF Code + 4	9. Business deals with:  a. Labor Organiza ion  b. Trust  c. Employer				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name Trade Name, if any:  P.O. Box, Bidg., Room No., if any					
Street	11.b. Approximate dollar value of such dealing.				
City	12.a. Nature of interest held or income received.				
State ZIF Code + 4					
	12.b. Amount.				
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name SSS Affactiment	SEE Attachment				
ł.					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
P.O. Box, Bidg., Room No., if any	14.b. Amount of payment.				

## Attachment "A"

## Form LM-30 (Labor Organization Officer and Employee Report)

Fiscal Year: 01/01/2004 thru 12/31/2004

Reporting Labor Organization: Brotherhood of Locomotive Engineers and Trainmen (BLET-

**BNSF/MRL GCA)** 

Labor Organization Officer: Dennis R. Pierce (General Chairman)

5-digit OLMS File Number: None available at this time

Organization File Number: 2004LM-30 Ending Date of Reporting Period: 12/31/2004

\*The purpose of this Attachment "A" is to furnish additional itemized information pertaining to Part C (Items 13 thru 14) of the Form LM-30

report. The information shown below reflects the best good-faith estimate of value and occasion based upon personal recollection.

13a.Name and Address of	13b.Business is an	14a.Nature of Payment	14b. Amount of Payment
Employer/Labor Relations	employer/Consultant	ļ	and the state of t
Consultant			
Rathmann, and O'Brien, L.L.C.	Employer	7/1/04-Supper Banquet in conjunction with Union	In excess of \$25.00
1031 Lami Street		function, multiple sponsors	1
St. Louis, MO 63104			
			1
Yaeger, Jungbauer, Barczak &	]		
Vucinovich, PLC.			
745 Kasota Ave.	+		
Minneapolis, MN 55414			
		; 	
Ingebritson & Associates, P.A.			
100 South Fifth Street, Suite 450			
Minneapolis, MN 55402			
1			
Jones & Granger	1		}
10000 Memorial Drive, Suite 888			1
Houston, TX 77210			
Sahliahtan Dagard & Dantan			
Schlichter, Bogard & Denton 100 S. 4 <sup>th</sup> St., Suite 900			
St. Louis, MO 63102			
1 DL LOUIS, MO 03 IV2	l .	l .	

13a.Name and Address of Employer/Labor Relations Consultant	13b.Business is an employer/Consultant	14a.Nature of Payment	14b. Amount of Payment
Hunegs, Stone, LeNeave, Kvas & Thornton 900 Second Ave. South, Suite 1650 Minneapolis, MN 55402	Employer	7/1/04-Supper Banquet in conjunction with Union function, multiple sponsors (continued)	In excess of \$25.00
Rose, Sanders & Bovarnick, L.L.P. 1205 N.W. 25 <sup>th</sup> Ave. Portland, OR 97210			